



CONTRACT: REPORT BY CONTRACTOR FOREST, RANGE & TIMBER INDUSTRY

This report is to be completed and sent upon execution of any contractual agreement with any contractor engaged in providing manual or technical services to forest range or timberland owners before any work covered by this agreement commences. This includes any additional awards to a written or verbal contract. Contract must be maintained and made available upon request. Keep photocopy for your records and mail original to the address in the upper left hand corner of this form.

<input type="checkbox"/> Contractor Check the applicable box <input type="checkbox"/> Subcontractor		List all subcontractors below and also have each subcontractor complete and submit one of these forms. If you are a subcontractor list below the name of the contractor for whom you are working.	
Your company name		Award date	
Address		Is this an open ended or verbal contract? <input type="checkbox"/> Yes <input type="checkbox"/> No	
City	State ZIP+4	Is this an addition to a prior contract? <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount of contract \$
Contact person for this contract		Contact's phone #	Contractor's est. start date / /
Your UBI	Your Account ID	Contractor's est completion date / /	Est. No. of acres contract covers
Do you have workers' compensation coverage in other state(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No List state(s):		Est. total wages of your workers \$	Est. total work hrs of your workers
Your farm labor license #		How do you pay your workers? <input type="checkbox"/> check <input type="checkbox"/> cash <input type="checkbox"/> other, please indicate	
Name of landowner issuing contract		Phone #	
Landowner's contact person for this contract		Contract # assigned by landowner	
		What is the basis for worker payment? <input type="checkbox"/> hourly <input type="checkbox"/> piece work <input type="checkbox"/> salary <input type="checkbox"/> other, please indicate	

Crew or Manual Labor Svcs

Description of work covered by contract.

- | | | | |
|--|---|---|---|
| 1. <input type="checkbox"/> Animal damage trapping | 7. <input type="checkbox"/> Forest fire fighting | 13. <input type="checkbox"/> Manual roadside brushing | 19. <input type="checkbox"/> Tree netting |
| 2. <input type="checkbox"/> Bear feeding | 8. <input type="checkbox"/> Forest trail construction | 14. <input type="checkbox"/> Pile burning | 20. <input type="checkbox"/> Tree pruning |
| 3. <input type="checkbox"/> Bud capping | 9. <input type="checkbox"/> Hand app. of fertilizer/chemicals | 15. <input type="checkbox"/> Pre-comm. tree thinning | 21. <input type="checkbox"/> Tree shading |
| 4. <input type="checkbox"/> Cone picking | 10. <input type="checkbox"/> Hand piling | 16. <input type="checkbox"/> Scion collection | 22. <input type="checkbox"/> Whip falling |
| 5. <input type="checkbox"/> Conifer release | 11. <input type="checkbox"/> Hand slashing | 17. <input type="checkbox"/> Slash burning | 23. <input type="checkbox"/> Wildlife habitat development |
| 6. <input type="checkbox"/> Fire watch/patrol | 12. <input type="checkbox"/> Manual erosion control | 18. <input type="checkbox"/> Tree and shrub planting | 24. <input type="checkbox"/> Other |

Mechanized Services

- | | |
|---|------------------------------------|
| 31. <input type="checkbox"/> Hydro seeding | 37. <input type="checkbox"/> Other |
| 32. <input type="checkbox"/> Machine piling and scarification | |
| 33. <input type="checkbox"/> Mechanized pre-commercial thinning | |
| 34. <input type="checkbox"/> Roadside brushing | |
| 35. <input type="checkbox"/> Roadside spraying | |
| 36. <input type="checkbox"/> Roadway dust and mud control | |

Technical Services

- | | |
|--|------------------------------------|
| 41. <input type="checkbox"/> Data Collection | 46. <input type="checkbox"/> Other |
| 42. <input type="checkbox"/> Scientific tree studies | |
| 43. <input type="checkbox"/> Timber cruising | |
| 44. <input type="checkbox"/> Timber surveying | |
| 45. <input type="checkbox"/> Tree audits | |

Comments

Other

Contractor/Subcontractor's name	Phone number	UBI	Contract duration Start date End date	Estimated hours	Amount of contract

Preparer complete

Phone #

Title

I certify that this information is true and correct to the best of my knowledge

Signature